

UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF MICHIGAN  
**TRANSCRIPT ORDER FORM**

111 First Street  
Bay City, MI 48708

211 W. Fort Street  
17th Floor  
Detroit, MI 48226

226 W. Second Street  
Flint, MI 48502

**Order Party: Name, Address and Telephone Number**

Name Samuel S. Kohn

Firm Chadbourne & Parke LLP

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City, State, Zip New York, NY 10112

Phone 212-408-1060

Email skohn@chadbourne.com

**Case/Debtor Name:** In re City of Detroit

**Case Number:** 13-53846

**Chapter:** 9

**Hearing Judge:** Hon. Steven Rhodes

**Bankruptcy**     **Adversary**

**Appeal**    **Appeal No:** \_\_\_\_\_

**Hearing Information** (A separate form must be completed for **each** hearing date requested.)

**Date of Hearing:** 11/27/2013    **Time of Hearing:** 9:00 a.m.    **Title of Hearing:** Lighting Authority

Please specify portion of hearing requested:     **Original/Unredacted**     **Redacted**     **Copy (2<sup>nd</sup> Party)**

**Entire Hearing**     **Ruling/Opinion of Judge**     **Testimony of Witness**     **Other**

Special Instructions: This request is for the complete transcript for all matters heard.

**Type of Request:**

- Ordinary Transcript - \$3.65 per page (30 calendar days)
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Transcript To Be Prepared By \_\_\_\_\_

\_\_\_\_\_  
Date \_\_\_\_\_ By \_\_\_\_\_

Order Received:

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**Signature of Ordering Party:**

/s/ Samuel S. Kohn                      Date: 11/27/2013

By signing, I certify that I will pay all charges upon completion of the transcript request.